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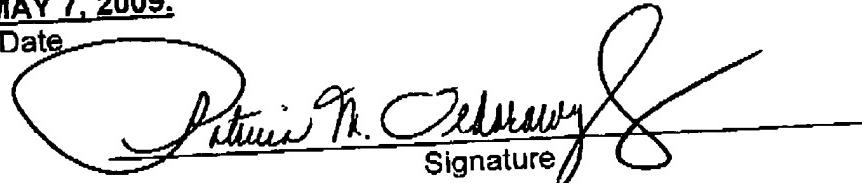
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 RCE (PTO/SB/30), in duplicate;
 PETITION FOR 2 MONTH EXTENSION (PTO/SB/22),
 in duplicate; and
 AMENDMENT, 11 pages.

Serial No.: 10/578,952

Examiner: Junior O. Mendoza

Art Unit: 2423

Docket No.: PU030295

TOTAL NUMBER OF PAGES INCLUDING THIS SHEET: 18

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PTO/SB/17 (D/06)

Approved for use through 07/31/2008. OMB 0651-0032
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
for FY 2007 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT**(\$)
1300.00**Complete If Known**

Application Number	10/578,952
Filing Date	May 10, 2006
First Named Inventor	Chad Andrew Le Fevre
Examiner Name	Junior O. Mendoza
Art Unit	2423
Attorney Docket No.	PU030295

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Fee Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Small Entity**Fee (\$)** **Fee (\$)**

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- or HP =	x \$50	= \$		Fee (\$) Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Independent Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- or HP =	x \$200	= 0	

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

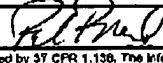
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): **FEES FOR TWO MONTH EXTENSION - \$490.00**
RCE FEE - \$810.00**Fee Paid (\$)****\$1300.00****SUBMITTED BY**

Name (Print/Type)	PAUL P. KIEL	Registration No. (Attorney/Agent)	40,677	Telephone	(609) 734-6815
Signature					May 7, 2009

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PTO/SB/17 (01/06)

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FEE TRANSMITTAL

for FY 2007

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TOTAL AMOUNT OF PAYMENT (\$)

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